



## UNITED STATES PATENT AND TRADEMARK OFFICE

COMMISSIONER FOR PATENTS  
UNITED STATES PATENT AND TRADEMARK OFFICE  
WASHINGTON, D.C. 20231  
www.uspto.gov



Bib Data Sheet

CONFIRMATION NO. 5679

<b>SERIAL NUMBER</b> 10/003,538	<b>FILING DATE</b> 10/30/2001 <b>RULE</b>	<b>CLASS</b> 705	<b>GROUP ART UNIT</b> 2621	<b>ATTORNEY DOCKET NO.</b> 6735-01	
<b>APPLICANTS</b> Raymond Ho, North York, CANADA; Edward Fung, North York, CANADA; <b>** CONTINUING DATA *****</b> THIS APPLN CLAIMS BENEFIT OF 60/243,718 10/30/2000 <b>** FOREIGN APPLICATIONS *****</b> <b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b> <b>** 01/07/2002</b>					
Foreign Priority claimed <input checked="" type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input checked="" type="checkbox"/> yes <input checked="" type="checkbox"/> no <input checked="" type="checkbox"/> met <input checked="" type="checkbox"/> not met Verified and Acknowledged <input checked="" type="checkbox"/> yes <input checked="" type="checkbox"/> no <input checked="" type="checkbox"/> met <input checked="" type="checkbox"/> not met Examiner's Signature <i>[Signature]</i>		<b>STATE OR COUNTRY</b> CANADA	<b>SHEETS DRAWING</b> 5	<b>TOTAL CLAIMS</b> 18 <i>A</i>	<b>INDEPENDENT CLAIMS</b> 3
<b>ADDRESS</b> McCormick, Paulding & Huber City Place II 185 Asylum Street Hartford, CT 06103-3402					
<b>TITLE</b> Authenticating software licenses					
<b>FILING FEE RECEIVED</b> 870	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		



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<b>** CONTINUING DATA *****</b> THIS APPLN CLAIMS BENEFIT OF 60/243,718 10/30/2000 <i>DFZ</i>					
<b>** FOREIGN APPLICATIONS *****</b>					
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Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged _____ Examiner's Signature Initials		<b>STATE OR COUNTRY</b> CANADA	<b>SHEETS DRAWING</b> 5	<b>TOTAL CLAIMS</b> 15	<b>INDEPENDENT CLAIMS</b> 3
<b>ADDRESS</b> McCormick, Paulding & Huber City Place II 185 Asylum Street Hartford, CT 06103-3402					
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